

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Long Leaf Pine PAC

ADDRESS (number and street)

607 14th Street, NW

Suite 800

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00459305

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

through

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Dwight M. Davidson, III

Signature of Treasurer

Electronically Filed by Dwight M. Davidson, III

Date

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 19

Write or Type Committee Name  
Long Leaf Pine PAC

Report Covering the Period:

From:

|   |   |
|---|---|
| M | M |
| 1 | 0 |

|   |   |
|---|---|
| D | D |
| 1 | 4 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

To:

|   |   |
|---|---|
| M | M |
| 1 | 1 |

|   |   |
|---|---|
| D | D |
| 2 | 2 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1  | 2010                    | 74704.08                          |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 23633.14                |                                   |
| (c) Total Receipts (from Line 19) .....   | 46000.00                | 201750.00                         |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....      | 69633.14                | 276454.08                         |
| 7. Total Disbursements (from Line 31) .....   | 57010.37                | 263831.31                         |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                 | 12622.77                | 12622.77                          |
| 9. Debts and Obligations owed TO<br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations owed BY<br>the committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 19

Write or Type Committee Name

Long Leaf Pine PAC

Report Covering the Period:

From:

|   |   |
|---|---|
| M | M |
| 1 | 0 |

|   |   |
|---|---|
| D | D |
| 1 | 4 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

To:

|   |   |
|---|---|
| M | M |
| 1 | 1 |

|   |   |
|---|---|
| D | D |
| 2 | 2 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  |                               |                                   |
| (i) Itemized (use Schedule A) .....  | 6500.00                       | 17750.00                          |
| (ii) Unitemized .....  | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 6500.00                       | 17750.00                          |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....  | 39500.00                      | 180000.00                         |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     | 46000.00                      | 197750.00                         |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 4000.00                           |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 46000.00                      | 201750.00                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 46000.00                      | 201750.00                         |

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

| II. DISBURSEMENTS  |          | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|----------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |          |                               |                                   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                     |          |                               |                                   |
| (i) Federal Share.....   | 0.00     | 0.00                          |                                   |
| (ii) Non-Federal Share.....  | 0.00     | 0.00                          |                                   |
| (b) Other Federal Operating Expenditures.....  | 19794.37 | 101015.31                     |                                   |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤                        | 19794.37 | 101015.31                     |                                   |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00     | 0.00                          |                                   |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 37216.00 | 162316.00                     |                                   |
| 24. Independent Expenditure (use Schedule E) .....   | 0.00     | 0.00                          |                                   |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00     | 0.00                          |                                   |
| 26. Loan Repayments Made.....  | 0.00     | 0.00                          |                                   |
| 27. Loans Made.....  | 0.00     | 0.00                          |                                   |
| 28. Refunds of Contributions To:   |          |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00     | 0.00                          |                                   |
| (b) Political Party Committees   | 0.00     | 0.00                          |                                   |
| (c) Other Political Committees (such as PACs) .....  | 0.00     | 0.00                          |                                   |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                           | 0.00     | 0.00                          |                                   |
| 29. Other Disbursements.....   | 0.00     | 500.00                        |                                   |
| 30. Federal Election Activity (2 U.S.C 431(20))  |          |                               |                                   |
| (a) Shared Federal Election Activity (from Schedule H6)  |          |                               |                                   |
| (i) Federal Share .....  | 0.00     | 0.00                          |                                   |
| (ii) "Levin" Share .....   | 0.00     | 0.00                          |                                   |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00     | 0.00                          |                                   |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....              | 0.00     | 0.00                          |                                   |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..       | 57010.37 | 263831.31                     |                                   |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 57010.37 | 263831.31                     |                                   |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 46000.00                      | 197750.00                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 46000.00                      | 197750.00                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 19794.37                      | 101015.31                         |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 19794.37                      | 101015.31                         |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 19

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Long Leaf Pine PAC

**A.**

Full Name (Last, First, Middle Initial)

George Cooper

Mailing Address 3812 Oval Drive

City

Alexandria

State

VA

Zip Code

22305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cauthen, Forbes & Williams

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 1 / 2 0 1 0

Transaction ID: C19010574

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Ronald J. Kuerbitz

Mailing Address 47 Park Avenue

City

Wellesley

State

MA

Zip Code

02481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fresenius Medical Care No-  
rth America

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 6 / 2 0 1 0

Transaction ID: C18952471

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

James M. Nussman

Mailing Address 3454 Merrimac Road

City

Davidsonville

State

MD

Zip Code

21035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Sports Fishing  
Association

Occupation

Trade Association Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 6 / 2 0 1 0

Transaction ID: C18952483

Amount of Each Receipt this Period

1500.00

**SUBTOTAL** of Receipts This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

6500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 19

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Long Leaf Pine PAC

**A.**

Full Name (Last, First, Middle Initial)

Altria Group, Inc. Political Action Committee

Mailing Address 101 Constitution Avenue, NW  
Suite 400W

City State Zip Code  
Washington DC 20001-2155

FEC ID number of contributing  
federal political committee.

**C** C00089136

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 6 / 2 0 1 0

Transaction ID: C18952661

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

American Inst. of Certified Public Accountants PAC

Mailing Address Palladian 1  
220 Leigh Farm Rd

City State Zip Code  
Durham NC 27707

FEC ID number of contributing  
federal political committee.

**C** C00077321

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 1 0

Transaction ID: C18960403

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

AT&T Inc. Federal Political Action Committee

Mailing Address 208 S. Akard Street  
Suite 3521

City State Zip Code  
Dallas TX 75202

FEC ID number of contributing  
federal political committee.

**C** C00109017

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 6 / 2 0 1 0

Transaction ID: C18952632

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

7500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 / 19

|                              |                              |   |   |
|------------------------------|------------------------------|---|---|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

Long Leaf Pine PAC

**A.**

Full Name (Last, First, Middle Initial)

Boehringer Ingelheim USA Corporation PAC

Mailing Address 900 Ridgebury Road  
Suite 315City State Zip Code  
Ridgefield CT 06877FEC ID number of contributing  
federal political committee.**C** C00420398

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 0 |   | 2 | 0 | 1 | 0 |

Transaction ID: C18974897

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

EADS North America PAC

Mailing Address 1616 North Ft. Myer Drive  
Suite 1600City State Zip Code  
Arlington VA 22209FEC ID number of contributing  
federal political committee.**C** C00421230

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 6 |   | 2 | 0 | 1 | 0 |

Transaction ID: C18952642

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

EMD Serono, Inc. PAC

Mailing Address One Technology Place

City State Zip Code  
Rockland MA 02370FEC ID number of contributing  
federal political committee.**C** C00258236

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 6 |   | 2 | 0 | 1 | 0 |

Transaction ID: C18952716

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 19

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Long Leaf Pine PAC

**A.**

Full Name (Last, First, Middle Initial)  
Federal Express Political Action Committee

Mailing Address 942 South Shady Grove Road

City State Zip Code  
Memphis TN 38120

FEC ID number of contributing  
federal political committee.

**C** C00068692

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C18992143

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)  
FMC Corporation Good Government Program

Mailing Address 1101 Pennsylvania Avenue, NW  
Suite 325

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00033704

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 2 / 2 0 1 0

Transaction ID: C19010217

Amount of Each Receipt this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)  
International Council of Shopping Centers Inc. PAC

Mailing Address 1399 New York Avenue  
Suite 720

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00217638

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 6 / 2 0 1 0

Transaction ID: C18952680

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 19

(check only one)

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17  |                              |   |                             |

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NAME OF COMMITTEE (In Full)

Long Leaf Pine PAC

**A.**

Full Name (Last, First, Middle Initial)

Investment Company Institute PAC

Mailing Address 1401 H Street, NW Suite 1200

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C**

C00105981

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 1 | 0 |

Transaction ID: C18992135

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

OSI Systems Inc. PAC

Mailing Address 1530 Wilson Blvd.  
Suite 170

City

Arlington

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.**C**

C00414896

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 6 |   | 2 | 0 | 1 | 0 |

Transaction ID: C18952726

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

PricewaterhouseCoopers Political Action Committee

Mailing Address 1301 K Street NW  
Suite 800 West

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C**

C00107235

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 0 |   | 2 | 0 | 1 | 0 |

Transaction ID: C18974916

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional) .....

6500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 19

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Long Leaf Pine PAC

**A.**

Full Name (Last, First, Middle Initial)

Prudential Financial Inc PAC

Mailing Address 751 Broad Street  
14th Floor

City State Zip Code  
Newark NJ 07102

FEC ID number of contributing  
federal political committee.

**C** C00127779

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 6 / 2 0 1 0

Transaction ID: C18952684

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Sallie Mae Inc. PAC

Mailing Address 12061 Bluemont Way

City State Zip Code  
Reston VA 20190

FEC ID number of contributing  
federal political committee.

**C** C00331835

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 1 0

Transaction ID: C18974901

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Sanofi-Aventis U.S. Inc. Employees PAC

Mailing Address 801 Pennsylvania Avenue NW  
Suite 725

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00144345

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 1 0

Transaction ID: C18974342

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 19

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Long Leaf Pine PAC

**A.**

Full Name (Last, First, Middle Initial)

Zeneca, Inc. PAC

Mailing Address 1800 Concord Pike, PO Box 15437

City

Wilmington

State

DE

Zip Code

19850

FEC ID number of contributing  
federal political committee.

**C**

C00279455

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

Transaction ID: C18992090

Amount of Each Receipt this Period

4000.00

**B.**

Full Name (Last, First, Middle Initial)

GlaxoSmithKline, LLC PAC

Mailing Address 5 Moore Drive  
P.O. Box 13358

City

Res. Triangle Park

State

NC

Zip Code

27709

FEC ID number of contributing  
federal political committee.

**C**

C00199703

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 1 0

Transaction ID: C18992097

Amount of Each Receipt this Period

2500.00

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

AMERIPAC: The Fund for Greater America

Mailing Address 499 S. Capitol Street, SW  
Suite 414

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

**C**

C00271338

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C18992097B

Amount of Each Receipt this Period

2500.00

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**SUBTOTAL** of Receipts This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

39500.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 19

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Long Leaf Pine PAC

|  |   |
|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>AWF Consulting  | <b>Transaction ID:</b> D435766<br><b>Date of Disbursement</b>   |
| Mailing Address 426 C Street, NE   | <div> <div>10</div> <div>29</div> <div>2010</div> </div>  |
| City Washington State DC Zip Code 20002  | <b>Amount of Each Disbursement this Period</b>  |
| Purpose of Disbursement Fundraising Consulting Services & Travel<br>Candidate Name   | <div>5379.50</div>  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Bank of America   | <b>Transaction ID:</b> D440636<br><b>Date of Disbursement</b>   |
| Mailing Address 101 West Friendly Avenue   | <div> <div>10</div> <div>15</div> <div>2010</div> </div>  |
| City Greensboro State NC Zip Code 27401-2083   | <b>Amount of Each Disbursement this Period</b>  |
| Purpose of Disbursement Bank Fee<br>Candidate Name   | <div>35.22</div>  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Bank of America   | <b>Transaction ID:</b> D440637<br><b>Date of Disbursement</b>   |
| Mailing Address 101 West Friendly Avenue   | <div> <div>11</div> <div>15</div> <div>2010</div> </div>  |
| City Greensboro State NC Zip Code 27401-2083   | <b>Amount of Each Disbursement this Period</b>  |
| Purpose of Disbursement Bank Fee<br>Candidate Name   | <div>54.81</div>  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

**SUBTOTAL** of Disbursements This Page (optional) .....

5469.53

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 19

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Long Leaf Pine PAC

|  |   |
|--|---|
| <p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>National Processing Company</p> <p>Mailing Address 5100 Interchange Way<br/>Suite 100</p> <p>City Louisville State KY Zip Code 40229</p> <p>Purpose of Disbursement<br/>Merchant Service Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D440638</p> <p>Date of Disbursement<br/> <div> <div>11</div> <div>02</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period<br/> <div>40.95</div> </p>    |
| <p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Perkins Coie, LLP</p> <p>Mailing Address 1201 Third Avenue<br/>40th Floor</p> <p>City Seattle State WA Zip Code 98101-3099</p> <p>Purpose of Disbursement<br/>Legal &amp; Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D435768</p> <p>Date of Disbursement<br/> <div> <div>10</div> <div>27</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period<br/> <div>1506.74</div> </p>  |
| <p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Pinehurst Resort</p> <p>Mailing Address PO Box 4000</p> <p>City Pinehurst State NC Zip Code 28374</p> <p>Purpose of Disbursement<br/>Catering &amp; Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>                                   | <p><b>Transaction ID:</b> D440424</p> <p>Date of Disbursement<br/> <div> <div>11</div> <div>22</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period<br/> <div>12777.15</div> </p> |

**SUBTOTAL** of Disbursements This Page (optional) .....

**14324.84**

**TOTAL** This Period (last page this line number only) .....

**19794.37**

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 19

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Long Leaf Pine PAC

**A.**

Full Name (Last, First, Middle Initial)  
Blumenthal for Senate

Mailing Address 777 Summer Street

City State Zip Code  
Stamford CT 06901

Purpose of Disbursement  
Contribution

Candidate Name  
Richard Blumenthal

Category/  
Type

Office Sought: ☐ House ☒ Senate ☐ President  
Disbursement For: 2010 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: CT District:

**Transaction ID:** D435769

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)  
Bob Etheridge for Congress Committee

Mailing Address PO Box 28001

City State Zip Code  
Raleigh NC 27611

Purpose of Disbursement  
Contribution

Candidate Name  
Bob Etheridge

Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2010 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 02

**Transaction ID:** D435788

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)  
Chris Coons for Delaware

Mailing Address PO Box 9900

City State Zip Code  
Newark DE 19714

Purpose of Disbursement  
Contribution

Candidate Name  
Christopher A. Coons

Category/  
Type

Office Sought: ☐ House ☒ Senate ☐ President  
Disbursement For: 2010 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: DE District:

**Transaction ID:** D435776

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Long Leaf Pine PAC

|  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Conway for Senate   | <b>Transaction ID:</b> D435779<br><b>Date of Disbursement</b>   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address PO Box 6168  | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 |  | 1 | 8 |  | 2 | 0 | 1 | 0 |
| M  | M   | /       | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 1  | 0   |         | 1 | 8 |   | 2 | 0 | 1 | 0 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Louisville State KY Zip Code 40206  | <b>Amount of Each Disbursement this Period</b>  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement Contribution   | <table border="1"> <tr> <td>2500.00</td> </tr> </table>   | 2500.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 2500.00  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name John W. Conway  | Category/Type   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: KY District: | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Elaine Marshall Committee   | <b>Transaction ID:</b> D435781<br><b>Date of Disbursement</b>   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 324 South Wilmington Street  | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 |  | 1 | 8 |  | 2 | 0 | 1 | 0 |
| M  | M   | /       | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 1  | 0   |         | 1 | 8 |   | 2 | 0 | 1 | 0 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Raleigh State NC Zip Code 27601   | <b>Amount of Each Disbursement this Period</b>  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement Contribution   | <table border="1"> <tr> <td>4716.00</td> </tr> </table>   | 4716.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 4716.00  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name Elaine F. Marshall  | Category/Type   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NC District: | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Friends of Barbara Boxer  | <b>Transaction ID:</b> D435772<br><b>Date of Disbursement</b>   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address PO Box 411176  | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 |  | 1 | 8 |  | 2 | 0 | 1 | 0 |
| M  | M   | /       | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 1  | 0   |         | 1 | 8 |   | 2 | 0 | 1 | 0 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Los Angeles State CA Zip Code 90041   | <b>Amount of Each Disbursement this Period</b>  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement Contribution   | <table border="1"> <tr> <td>2500.00</td> </tr> </table>   | 2500.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 2500.00  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name Barbara Boxer   | Category/Type   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: CA District: | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

**SUBTOTAL** of Disbursements This Page (optional) .....

9716.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 19

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Long Leaf Pine PAC

A.

Full Name (Last, First, Middle Initial)  
Friends of Blanche Lincoln

Mailing Address PO Box 3197

City Little Rock State AR Zip Code 72203

Purpose of Disbursement  
Contribution

Candidate Name  
Blanche L. Lincoln

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AR District:

Transaction ID: D435782

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)  
Heath Shuler for Congress

Mailing Address PO Box 8446

City Asheville State NC Zip Code 28814

Purpose of Disbursement  
Contribution

Candidate Name  
Heath Shuler

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 11

Transaction ID: D435787

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)  
Kissell for Congress

Mailing Address P.O. Box 1530

City Biscoe State NC Zip Code 27209

Purpose of Disbursement  
Contribution

Candidate Name  
Larry Kissell

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 08

Transaction ID: D435789

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Long Leaf Pine PAC

|    |   |   |
|----|---|---|
| A. | <p>Full Name (Last, First, Middle Initial)<br/>Manchin for West Virginia</p> <p>Mailing Address PO Box 5202</p> <p>City Charleston State WV Zip Code 25361</p> <p>Purpose of Disbursement Contribution <input type="text"/></p> <p>Candidate Name Joe Manchin, III</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: WV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼<br/>2010 Special General</p> | <p>Transaction ID: D435785</p> <p>Date of Disbursement<br/> <div> <div>10</div> <div>18</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period<br/> <div>2500.00</div> </p> |
| B. | <p>Full Name (Last, First, Middle Initial)<br/>Mike McIntyre for Congress</p> <p>Mailing Address P.O. Box 1</p> <p>City Lumberton State NC Zip Code 28359</p> <p>Purpose of Disbursement Contribution <input type="text"/></p> <p>Candidate Name Mike McIntyre</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NC District: 07</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>                           | <p>Transaction ID: D435786</p> <p>Date of Disbursement<br/> <div> <div>10</div> <div>18</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period<br/> <div>5000.00</div> </p> |
| C. | <p>Full Name (Last, First, Middle Initial)<br/>People for Patty Murray</p> <p>Mailing Address P.O. Box 3662</p> <p>City Seattle State WA Zip Code 98124</p> <p>Purpose of Disbursement Contribution <input type="text"/></p> <p>Candidate Name Patty Murray</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: WA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>                                 | <p>Transaction ID: D435784</p> <p>Date of Disbursement<br/> <div> <div>10</div> <div>18</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period<br/> <div>2500.00</div> </p> |

SUBTOTAL of Disbursements This Page (optional) .....

10000.00

TOTAL This Period (last page this line number only) .....

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|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Long Leaf Pine PAC

A.

Full Name (Last, First, Middle Initial)  
Sestak for Senate

Mailing Address PO Box 1936

City State Zip Code  
Media PA 19063

Purpose of Disbursement  
Contribution

Candidate Name  
Joseph A. Sestak, Jr.

Office Sought: ☐ House  
☒ Senate  
☐ President

State: PA District:

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: D435783

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....

37216.00